| Data Col | tion - Reporting Carrier lection Form | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0919 July 2013 |
|----------|---|--|
| <010> | Study Area Code | 170170 |
| <015> | Study Area Name | VERIZON N-PA(CONTEL) |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | Alan J. Buzacott |

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

<035> Contact Telephone Number - Number of person identified in data line <030> 2025152595 ext.

<039> Contact Email Address - Email Address of person identified in data line <030> alan.buzacott@verizon.com

| I certify that I am an officer of the reporting carrier; my responsi | ibilitles include ensuring the accuracy of the annual reporting requirements for unive | rsal service support |
|--|--|----------------------|
| recipients; and, to the best of my knowledge, the information re | | |
| Name of Reporting Carrier: VERIZON N-PA (CONTEL) | | |
| Signature of Authorized Officer: CERTIFIED ONLINE | Dat | e 06/26/2014 |
| Printed name of Authorized Officer: Robert Mutzenback | | |
| Title or position of Authorized Officer: Assistant Controller | | |
| Telephone number of Authorized Officer: 9085593924 ext. | | |
| Study Area Code of Reporting Carrier: 170170 | Filing Due Date for this form: 07/01/2014 | |

| C 2020145-00000500 | ion - Agent / Carrier action Form | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0919 July 2013 |
|--------------------|---|--|
| <010> | Study Area Code | 170170 |
| <015> | Study Area Name | VERIZON N-PA(CONTEL) |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | Alan J. Buzacott |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2025152595 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | alan.buzacott@verizon.com |

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

| ertify that (Name of Agent)is authorized to submit the information reported on behalf of the reporting carriers as certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized tent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate. | | | | | |
|---|--|--|--|--|--|
| Name of Authorized Agent: | - The state of the | | | | |
| Name of Reporting Carrier: | | | | | |
| Signature of Authorized Officer: | Date: | | | | |
| Printed name of Authorized Officer: | | | | | |
| Title or position of Authorized Officer: | | | | | |
| Telephone number of Authorized Officer: | | | | | |
| Study Area Code of Reporting Carrier: | Filing Due Date for this form: | | | | |

TO BE COMPLETED BY THE AUTHORIZED AGENT:

| Certification of Agent A | Authorized to File Annual Reports for CAF or LI Reci | plents on Behalf of Reporting Carrier |
|---|---|---|
| 를 보고 있는 경기를 받고 있다면 있다면 함께 되었다. (Participal Participal Participal Participal Participal Participal Participal Pa | orized to submit the annual reports for universal service suppreporting carrier; and, to the best of my knowledge, the inform | port recipients on behalf of the reporting carrier; I have provided mation reported herein is accurate. |
| Name of Reporting Carrier: | | |
| Name of Authorized Agent or Employee of Agent: | | |
| Signature of Authorized Agent or Employee of Agent: | | Date: |
| Printed name of Authorized Agent or Employee of Agent: | | |
| Title or position of Authorized Agent or Employee of Agent | | |
| Telephone number of Authorized Agent or Employee of Age | ent: | |
| | Filing Due Date for this form: | |

Attachments

REDACTED FOR PUBLIC INSPECTION

(700) Price Offerings including Voice Rate Data FCC Form 481 **Data Collection Form** OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 170170 <010> Study Area Code Study Area Name VERIZON N-PA (CONTEL) <020> Program Year 2015 Contact Name - Person USAC should contact regarding this data <030> Alan J. Buzacott Contact Telephone Number - Number of person identified in data line <030> <035> 2025152595 ext. Contact Email Address - Email Address of person identified in data line <030> alan.buzacott@verizon.com 1/1/2014 Residential Local Service Charge Effective Date

<703>

<702>

Single State-wide Residential Local Service Charge

| <a1></a1> | <a2></a2> | <a3></a3> | h1> | 402> - 1244. | | <ba></ba> <ba></ba> <ba></ba> <br< th=""><th><bs><</bs></th><th>(C)</th></br<> | <bs><</bs> | (C) |
|-----------|-----------------|------------|-----------|-----------------------------------|---|--|---|-------------------------------|
| State | Exchange (ILEC) | SAC (CETC) | Rate Type | Residential Local Service Rate | State Subscriber Line Charge | State Universal Service Fee | Mandatory Extended Area Service Charge | Total per line Rates and Fees |
| PA | EMMAUS | | FR | | | | | |
| PA | MCKEANSBG | | FR | | | | | |
| PA | SELINSGRV | | FR | | | | | |
| PA | BEAVER SPG | | FR | | | | | |
| PA | ELKLAND | | FR | | | | | |
| PA | HARRISNVLY | | FR | | | | | |
| PA | KNOXVILLE | | FR | | | | | |
| PA | MANTZVILLE | | FR | | | | | |
| PA | MIDDLEBURG | | FR | | | | | |
| PA | MTPLSANTML | | FR | | | | | |
| PA | SABINSVL | | FR | | | | | |
| PA | WESTFIELD | | FR | | | | | |
| PA | Hershey | | FR | | | | | |
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| <010> | Study Area Code | 170170 |
|-------|---|---------------------------|
| <015> | Study Area Name | VERIZON N-PA(CONTEL) |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | Alan J. Buzacott |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2025152595 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | alan.buzacott@verizon.com |

| <31> | <92> | 5b1> | <b2></b2> | বেচ্চ ৩১ | <d2></d2> | · <d3></d3> | CARRIED STATE | <d4></d4> |
|-------|-----------------|---------------------|-------------------------|-------------------------|-----------|---|-------------------------|--|
| State | Exchange (ILEC) | Residential Rate | State Regulated Fees | Total Rates and Fees | | Broadband Service -Upload Speed (Mbps) | Usage Allowance (GB) | Usage Allowance Action Taken When Limit Reached {select} |
| PA | All | | | | | | | Other, No limit on usage allowance |
| PA | All | | | | | | | Other, No limit on usage allowance |
| PA | All | | | | | | | Other, No limit on usage allowance |
| PA | All | | | | | | | Other, No limit on usage allowance |
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| (800) | Oper | ating | Com | pani | es |
|-------|--------|--------|------|------|----|
| Data | Collec | tion l | form | | |

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

| <010> | Study Area Code | 170170 |
|-------|---|---------------------------|
| <015> | Study Area Name | VERIZON N-PA (CONTEL) |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | Alan J. Buzacott |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2025152595 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | alan.buzacott@verizon.com |
| <810> | Reporting Carrier Verizon North LLC | |
| <811> | Holding Company | |
| <812> | Operating Company Verizon North LLC | |

| Affiliates | SAC | Doing Business As Company or Brand Designation |
|---|--------|--|
| Verizon New England Inc. | 115112 | Verizon |
| Verizon New England Inc. | 585114 | Verizon |
| Verizon New York Inc. | 155130 | Verizon |
| Verizon New Jersey Inc. | 165120 | Verizon |
| Verizon Pennsylvania LLC | 175000 | Verizon |
| Verizon North LLC | 170169 | Verizon |
| Verizon North LLC | 170170 | Verizon |
| Verizon North LLC | 170201 | Verizon |
| Verizon Maryland LLC | 185030 | Verizon |
| Verizon Virginia LLC | 195040 | Verizon |
| Verizon Florida LLC | 210328 | Verizon |
| Verizon Delaware LLC | 565010 | Verizon |
| Verizon Washington D.C. Inc. | 575020 | Verizon |
| Verizon California Inc. | 542319 | Verizon |
| Verizon California Inc. | 542302 | Verizon |
| GTE Southwest d/b/a Verizon Southwest | 442080 | Verizon |
| GTE Southwest d/b/a Verizon Southwest | 442154 | Verizon |
| Verizon South Inc. | 190233 | Verizon |
| Verizon South Inc. | 190479 | Verizon |
| Verizon South Inc. | 230864 | Verizon |
| MCImetro Access Transmission Services LLC | 449007 | Verizon |
| RSA 7 Limited Partnership | 359070 | Verizon |
| Iowa 8 Monona Limited Partnership | 359071 | Verizon |

| | erating Companies lection Form | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 |
|-------|---|--|
| <010> | Study Area Code | 170170 |
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| <039> | Contact Email Address - Email Address of person identified in data line <030> | alan.buzacott@verizon.com |
| <810> | Reporting Carrier Verizon North LLC | |
| <811> | Holding Company | |

Verizon North LLC

<812> Operating Company

| 13> | <a1></a1> | <a2></a2> | (a3 > |
|-----|--|-----------|--|
| | Affiliates | SAC | Doing Business As Company or Brand Designation |
| 100 | North Central RSA 2 of North Dakota Limited Partnership | 389006 | Verizon |
| | Northwest Dakota Cellular of North Dakota Limited Partnershi | 389007 | Verizon |
| | North Dakota RSA No. 3 Limited Partnership | 389008 | Verizon |
| _ | Badlands Cellular of North Dakota Limited Partnershi | 389009 | Verizon |
| | North Dakota 5 Kidder Limited Partnership | 389010 | Verizon |
| | St. Lawrence Seaway RSA Cellular Partnership | 159014 | Verizon |
| | New York RSA 2 Cellular Partnership | 159015 | Verizon |
| | Wisconsin RSA #1 Partnership | 339023 | Verizon |
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Verizon works to satisfy all service requests, but not every initiated order is ultimately fulfilled. There are occasions when broadband service cannot be installed at the requesting address location due to reasons such as distance, capacity, and equipment incompatibility. In those cases, Verizon will review whether it can provide broadband service from other access points or utilize available equipment. If Verizon's review is unsuccessful, then the order is cancelled and the customer is notified.

Name of companies covered by this Certification: Contel Pennsylvania

I, Timothy Smith, certify that I am an officer of each of the Verizon entities listed above and, acting as an agent of these companies. Verizon has established operating procedures designed to comply with applicable consumer protection rules. Verizon is subject to service quality requirements in many states and complies with their related duties, which, depending on the state, may include periodic performance reporting, the implementation of improvement plans and monetary payments if the reported performance does not meet applicable standards.

Name of signatory: Timothy Smith

Name of companies covered by this Certification: Contel Pennsylvania

I, Timothy Smith, certify that I am an officer of the reporting carrier and that my responsibilities include ensuring compliance with the requirements of 47 CFR 54.202(a)(2) that the carrier be able to function in emergency situations. Specifically, the reporting carrier has a reasonable amount of back-up power to ensure functionality without an external power source, is generally able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations. I certify that the carrier is able to function in emergency situations as set forth in section 54.202(a)(2).

Name of signatory: Timothy Smith

Name of companies covered by this Certification: Contel Pennsylvania

I, Timothy Smith, an officer of the reporting carrier, certify that the voice service rates for the Verizon entity listed above is less than two standard deviations above the applicable national average urban rate for voice service, as required in 47 C.F.R. § 54.313(a)(10).

Name of signatory: Timothy Smith

| FCC For | m 481 - Carrier Annual Reporting Data Collection Form | | | FCC Form 481 OMB Control No. 3060- July 2013 | 0985/OMB Control No. 3060-0819 |
|------------------|--|------------------------|-----------------------------------|--|--|
| | Data Collection Form | Market Market | | | |
| <010> | Study Area Code | 170201 | | | |
| <015> | Study Area Name | VERIZON N-PA (QUAKER |) | | |
| <020> | Program Year | 2015 | | | - N - 100 - |
| <030> | Contact Name: Person USAC should contact with questions about this data | Alan J. Buzacott | | | |
| <035> | Contact Telephone Number: Number of the person identified in data line <030> | 2025152595 ext. | | | and the second second second |
| <039> | Contact Email Address: Email of the person identified in data line <030> | alan.buzacott@veriz | on.com | | |
| ANNUA | L REPORTING FOR ALL CARRIERS | | | | 54.313 54.423 Completion Required Required (check box when complete) |
| <100> | Service Quality Improvement Reporting | | (complete attached wo | rksheet) | ✓ ************************************ |
| <200> | Outage Reporting (voice) | | (complete attached wo | rksheet) | 1 |
| <210> | | o outages to report | | The second secon | V 3111111 |
| <300> | Unfulfilled Service Requests (voice) 0 | | | _ | |
| <310> | Detail on Attempts (voice) | | | (attach descriptive do | ocument) |
| <320> | Unfulfilled Service Requests (broadband) 17 | | | | · / ////////////////////////////////// |
| ~32U | 170201pa330.pdf | | | 7 | |
| <330> | Detail on Attempts (broadband) | | | (attach descriptive o | document) |
| <400> | Number of Complaints per 1,000 customers (voice) | | | | |
| <410> | Fixed | | | | |
| <420> | Mobile | | | | |
| <430> <440> | Number of Complaints per 1,000 customers (broad) | band) | | | · / ////////////////////////////////// |
| <450> | Mobile | | | | |
| <500> | Service Quality Standards & Consumer Protection R | ules Compliance | (check to indicate cert | ification) | / |
| <510> | 170201pa510.pdf | | (attached descriptiv | e document) | 1 |
| <600> | Functionality in Emergency Situations | | (check to indicate cert | ification) | |
| | 170201pa610.pdf | | | | |
| <610> | | | (attached descriptive de | ocument) | |
| <700> | Company Price Offerings (voice) | | J | ndrhaatl | / 11111111 |
| <700> <710> | and the second s | | (complete attached wo | | |
| <800> | mana alima kan alima alimana a | | (complete attached wo | 237 132 | |
| <900> | Tribal Land Offerings (Y/N)? | (If s | es, complete attached wo | | 1 military |
| <1000> | Voice Services Rate Comparability 170201pa1010.pdf | | (check to indicate cert | ification) | |
| <1010 | | | (attach descriptive do | cument) | / |
| <1100 | Terrestrial Backhaul (Y/N)? | (if | not, check to indicate cen | tification) | |
| <1110> | | | (complete attached w | | |
| <1200> | Price Cap Carriers, Proceed to Price Cap Additional | Documentation Works | (complete attached with | orksheetj | VIIII . |
| | Including Rate-of-Return Carriers affiliated with Pr | ice Cap Local Exchange | Carriers | | |
| <2000> <2005> | | 7 | (check to indicate certi | | |
| ~2005> | Rate of Return Carriers, Proceed to ROR Additional | Documentation Works | (complete attached wa sheet | n nameer j | |
| <3000> | | | (check to indicate certi | fication) | HIIII. |
| ~3005N | | | for an alasta astronological con- | -frek-netl | ACCOUNT OF THE PARTY OF THE PAR |

| | ervice Quality Improvement Reporting | | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 |
|-------|---|---------------------------|--|
| <010> | Study Area Code | 170201 | |
| <015> | Study Area Name | VERIZON N-PA (QUAKER) | |
| <020> | Program Year | 2015 | |
| <030> | Contact Name - Person USAC should contact regarding this data | Alan J. Buzacott | |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2025152595 ext. | |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | alan.buzacott@verizon.com | |
| <110> | Has your company received its ETC certification from the FCC? | (yes / no) O • | |
| <111> | If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC? | (yes / no) O O | |
| <112> | report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service. Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your of CETC which only receives frozen support, your progress report is only required to address voice telephony service. | ompany is a | Name of Attached Document |
| | Please check these boxes below to confirm that the attached documents(s), on li 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate. | ne | |
| <113> | Maps detailing progress towards meeting plan targets | | |
| <114> | Report how much universal service (USF) support was received | | |
| <115> | How (USF) was used to improve service quality | | |
| <116> | How (USF)was used to improve service coverage | | |
| <117> | How (USF) was used to improve service capacity | | |
| <118> | Provide an explanation of network improvement targets not met in the prior calendar year. | | |

| (200) Service | Outage | Reporting | (Voice) |
|-----------------|---------|-----------|----------|
| Data Collection | on Form | | - 100.00 |

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FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

| <010> | Study Area Code | 170201 |
|-------|---|---------------------------|
| <015> | Study Area Name | VERIZON N-PA (QUAKER) |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | Alan J. Buzacott |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2025152595 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | alan.buzacott@verizon.com |

| <a> | <b1></b1> | <b2></b2> | <b3></b3> | <b4></b4> | <c1></c1> | <c2></c2> | <d></d> | <e></e> | <f></f> | <g></g> | <h></h> |
|-----------------------------|----------------------|----------------------|--------------------|--------------------|---------------------------------|------------------------------|--|--|---|------------------------------|----------------------------|
| NORS Reference Number | Outage Start Date | Outage Start Time | Outage End Date | Outage End Time | Number of Customers Affected | Total Number of Customers | 911 Facilities Affected (Yes / No) | Service Outage Description (Check all that apply) | Did This Outage Affect Multiple Study Areas (Yes / No) | Service Outage Resolution | Preventative Procedures |
| | - | | | | | | | <u> </u> | | | |
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| 1333336330 | ce Offerings including Voice Rate Data lection Form | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 |
|------------|---|---|
| <010> | Study Area Code | 170201 |
| <015> | Study Area Name | VERIZON N-PA(QUAKER) |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | Alan J. Buzacott |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2025152595 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | alan.buzacott@verizon.com |
| <701> | Residential Local Service Charge Effective Date 1/1/2014 | |

<702> Single State-wide Residential Local Service Charge

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|-----------|-----------------|------------|-----------|-----------------------------------|------------------------------|-----------------------------|---|-----------------------------|
| State | Exchange (ILEC) | SAC (CETC) | Rate Type | Residential Local Service Rate | State Subscriber Line Charge | State Universal Service Fee | Mandatory Extended Area Service Charge | Total per line Rates and Fe |
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| (710) | Broadban | d Price | Offerings | į |
|-------|------------|---------|-----------|---|
| Data | Collection | Form | | |

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

| <010> | Study Area Code | 170201 |
|-------|---|---------------------------|
| <015> | Study Area Name | VERIZON N-PA (QUAKER) |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | Alan J. Buzacott |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2025152595 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | alan.buzacott@verizon.com |

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|-------|-------|---|------------------|-------------------------|---------------------|---|--|-------------------------|--|
| | State | Exchange (ILEC) | Residential Rate | State Regulated Fees | Total Rate and Fees | Broadband Service - Download Speed (Mbps) | Broadband Service - Upload Speed (Mbps) | Usage Allowance (GB) | Usage Allowance Action Taken When Limit Reached (select) |
| | | | | | | | | | |
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| | perating Companies | | | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 |
|---|---|-------------------------------|----------------|---|
| <010> | Study Area Code | 170201 | | |
| <015> | Study Area Name | VERIZON N-PA | (OUAKER) | |
| <020> | Program Year | 2015 | - Ann - 2002 | |
| <030> | Contact Name - Person USAC should contact regarding this data | Alan J. Buza | cott | |
| <035> | | | xt. | |
| <039> | Contact Email Address - Email Address of person identified in data line <03 | <pre>0> alan.buzacot</pre> | t@verizon.com | |
| <810> | Reporting Carrier Verizon North LLC | | | |
| <811> | Holding Company | | | |
| <812> | Operating Company Verizon North LLC | | | |
| <813> | <a>> <a>> <a>> <a>> <a>> <a>> <a>> <a>> | | <a2></a2> | <89× |
| | Affiliates | | SAC | Doing Business As Company or Brand Designation |
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| | | - See att | ached worksh | et |
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| | bal Lands Reporting Jection Form | * | | | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 | |
|-----------|--|-------|-------------------------------------|-----------------|---|---|
| <010> | Study Area Code | | 170201 | | | |
| <015> | Study Area Name | | VERIZON N-PA (QUAKER) | | | |
| <020> | Program Year | | 2015 | | | |
| <030> | Contact Name - Person USAC should contact regarding this data | 222 | Alan J. Buzacott 2025152595 ext. | | | |
| <035> | Contact Telephone Number - Number of person identified in data line Contact Email Address - Email Address of person identified in data line | | alan.buzacott@verizon | | | _ |
| <910> | Tribal Land(s) on which ETC Serves | | | | | |
| <920> | Tribal Government Engagement Obligation | | | Name of Attache | ed Document | |
| If your c | ompany serves Tribal lands, please select (Yes,No, NA) for each these boxes | | | | | |
| to confi | rm the status described on the attached document(s), on line 920, | | | | | |
| demons | trates coordination with the Tribal government pursuant to | | ect | | | |
| § 54.313 | B(a)(9) includes: | 11.00 | ,No, | | | |
| <921> | Needs assessment and deployment planning with a focus on Tribal community anchor institutions. | | A) | | | |
| <922> | Feasibility and sustainability planning; | | | | | |
| <923> | Marketing services in a culturally sensitive manner; | | | | | |
| <924> | Compliance with Rights of way processes | | | | | |
| <925> | Compliance with Land Use permitting requirements | | | | | |
| <926> | Compliance with Facilities Siting rules | | | | | |
| <927> | Compliance with Environmental Review processes | | | | | |
| <928> | Compliance with Cultural Preservation review processes | | | | | |
| | | | | | | |

| | o Terrestrial Backhaul Reporting ection Form | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 |
|--------|---|--|
| <010> | Study Area Code | 170201 |
| <015> | Study Area Name | VERIZON N-PA(QUAKER) |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | Alan J. Buzacott |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2025152595 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | alan.buzacott@verizon.com |
| <1120> | Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G) | A # |
| <1130> | Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G) | |
| | | |
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| | | |

| Lifeline | erms and Condition for Lifeline Customers lection Form | | | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 |
|-----------|--|-------|---------------------------|---|
| <010> | Study Area Code | | 170201 | |
| <015> | Study Area Name | | VERIZON N-PA(QUAKER) | |
| <020> | Program Year | | 2015 | |
| <030> | Contact Name - Person USAC should contact regarding this data | | Alan J. Buzacott | |
| <035> | Contact Telephone Number - Number of person identified in data line | <030> | 2025152595 ext. | |
| <039> | Contact Email Address - Email Address of person identified in data line | <030> | alan.buzacott@verizon.com | |
| <1210> | Terms & Conditions of Voice Telephony Lifeline Plans | | | Name of Attached Document |
| <1220> | Link to Public Website | TTP w | ww22.verizon.com/tariffs/ | |
| or the we | heck these boxes below to confirm that the attached document(s), on line 1210 ebsite listed, on line 1220, contains the required information pursuant to (a)(2) annual reporting for ETCs receiving low-income support, carriers must report: |), | | |
| <1221> | Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, | 1 | | |
| <1222> | Details on the number of minutes provided as part of the plan, | 1 | | |
| <1223> | Additional charges for toll calls, and rates for each such plan. | 1 | | |
| | | | | |

| | rice Cap Carrier Additional Documentation | | a de en la | A CONTRACTOR OF THE CONTRACTOR | FCC Form 481 |
|-------------|---|--------------------------------|------------|--|--|
| September 1 | lection Form | | | | OMB Control No. 3060-0986/OMB Control No. 3060-0819 |
| including | Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers | | 分类是 | 40.50 | July 2013 |
| <010> | Study Area Code | 170201 | | | |
| <015> | Study Area Name | VERIZON N-PA (QUAKER) | | | |
| <020> | Program Year | 2015 | | | |
| <030> | Contact Name - Person USAC should contact regarding this data | Alan J. Buzacott | | | |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2025152595 ext. | | | |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | alan.buzacott@verizon.com | - | | |
| CHECK t | he boxes below to note compliance as a recipient of Incremental Connect Ameri support as set forth in 47 CFR § 54.313(b),(c),(d),(c | | | | NAMES OF THE PARTY |
| | Incremental Connect America Phase I reporting | | | | |
| <2010> | 2nd Year Certification {47 CFR § 54.313(b)(1)} | | | | |
| <2011> | 3rd Year Certification {47 CFR § 54.313(b)(2)} | | | | |
| | Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a)) | | | | |
| <2012> | 2013 Frozen Support Certification | | | | |
| <2013> | 2014 Frozen Support Certification | | | | |
| <2014> | 2015 Frozen Support Certification | | | | |
| <2015> | 2016 and future Frozen Support Certification | | | | |
| | Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)} | | | | |
| <2016> | Certification Support Used to Build Broadband | | | | |
| | Connect America Phase II Reporting (47 CFR § 54.313(e)) | | | | |
| <2017> | 3rd year Broadband Service Certification | | | \square | |
| <2018> | 5th year Broadband Service Certification | | | | |
| <2019> | Interim Progress Certification | | | | |
| <2020> | Please check the box to confirm that the attached document(s), on l pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support addresses of community anchor institutions to which began providing preceding calendar year. | shall provide the number, name | es, and | | |
| <2021> | Interim Progress Community Anchor Institutions | | | 0 | |
| | | _ | Name of At | ached Document Listin | as Penuirad Information |

| 20001 0 | (本方面) 16 · 本。在,在,在,在,在,在,在 | | 李·万海军 马 (A) (A) (A) (A) (A) |
|----------------|--|--|---|
| M . 3 | ate Of Return Carrier Additional Documentation | | FCC Form 481 |
| Jata Col | ection Form | THE STATE OF THE S | OMB Control No. 3060-0986/QMB Control No. 3060-0819 |
| 100 | | | Rdy 2013 |
| | | | |
| | Study Area Code | 170201 | |
| <015> | Study Area Name | VERIZON N-PA (QUAKER) | |
| <020> | Program Year Contact Name - Person USAC should contact regarding this data | 2015 Alan J. Buzacott | |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2025152595 ext. | |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | alan.buzacott@verizon.com | |
| CUECU | | | |
| CHECK | he boxes below to note compliance on its five year service quality plan (pursuan CFR 6 54.313/fi/2). I further certify that th | e information reported on this form and in the documents attac | |
| | | | |
| | | 1 | |
| (3010) | Progress Report on 5 Year Plan | I | j. |
| | Milestone Certification (47 CFR § 54.313(f)(1)(i)) | | |
| | | Name of Attached Document Listing Required Inform | nation |
| | Please check this box to confirm that the attached document(s), on line 3 | 012 contains the required information pursuant to | |
| (3011) | § 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addre | | |
| | providing access to broadband service in the preceding calendar year. | | |
| | | | |
| | | | |
| (3012) | Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii)) | | |
| | | | |
| | | Name of Attached Document Listing Required Information | |
| (3013) | Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) | (Yes/No) (Yes/No) | ≺ }~ |
| 522-222-24 | If yes, does your company file the RUS annual report | 4 | <i>5</i> 0 |
| Please | check these boxes to confirm that the attached document(s), on line 3017 | , contains the required information pursuant to § 54.313(f) | (2) compliance requires: |
| (3015) | Electronic copy of their annual RUS reports (Operating Report for | | |
| (2016) | Telecommunications Borrowers) | t Flame | |
| (3016) | Document(s) for Balance Sheet, Income Statement and Statement of Cas | in Flows | |
| -1201010012411 | | | |
| (3017) | If the response is yes on line 3014, attach your company's RUS annual | | |
| | report and all required documentation | | |
| | | Name of Attached Document Listing Required Information | |
| (3018) | If the response is no on line 3014, Is your company audited? | (Yes/No) | OiO |
| - Carlo 1997 | If the response is yes on line 3018, please check the boxes below to | | |
| | confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains | | |
| (3019) | Either a copy of their audited financial statement; or (2) a financial report in a fo | rmat comparable to RUS Operating Report for Telecommunication | ons I |
| | | | |
| (3020) | Document(s) for Balance Sheet, Income Statement and Statement of Ca | ish Flows | <u></u> |
| (3021) | Management letter issued by the independent certified public accountant that p | performed the company's financial audit. | |
| | If the response is no on line 3018, please check the boxes below | | |
| | to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), | | |
| | contains: | | |
| (3022) | Copy of their financial statement which has been subject to review by an | | |
| | independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications | | |
| | Borrowers, | | - |
| (3023) | Underlying information subjected to a review by an independent certified | | |
| | public accountant | | |
| (3024) | Underlying information subjected to an officer certification. | | |
| (3025) | Document(s) for Balance Sheet, Income Statement and Statement of Ca | sh Flows | |
| | I | | |
| (3026) | Attach the worksheet listing required information | | 1 |
| / | | | 1 |
| | 1 | | |
| | | Name of Attached Document Listing Required Information | |

| Certificat Data Coll | tion - Reporting Carrier lection Form | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 |
|-------------------------|--|--|
| <010> | Study Area Code | 170201 |
| <015> | Study Area Name | VERIZON N-PA (QUAKER) |

<015> Study Area Name VERIZON N-PA (QUAKER) <020> Program Year 2015 <030> Contact Name - Person USAC should contact regarding this data Alan J. Buzacott <035> Contact Telephone Number - Number of person identified in data line <030> 2025152595 ext. <039> Contact Email Address - Email Address of person identified in data line <030> alan.buzacott@verizon.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

| I certify that I am an officer of the reporting carrier; my responsit recipients; and, to the best of my knowledge, the information re | pilities include ensuring the accuracy of the annual reporting requirements for universal service support ported on this form and in any attachments is accurate. |
|---|---|
| Name of Reporting Carrier: VERIZON N-PA (QUAKER) | |
| Signature of Authorized Officer: CERTIFIED ONLINE | Date 06/26/2014 |
| Printed name of Authorized Officer: Robert Mutzenback | |
| Title or position of Authorized Officer: Assistant Controller | |
| Telephone number of Authorized Officer: 9085593924 ext. | |
| Study Area Code of Reporting Carrier: 170201 | Filing Due Date for this form: 07/01/2014 |

| 19/2004/2008/99 | ilon - Agent / Carrier lection Form | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 |
|-----------------|---|--|
| <010> | Study Area Code | 170201 |
| <015> | Study Area Name | VERIZON N-PA(QUAKER) |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | Alan J. Buzacott |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2025152595 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | alan.buzacott@verizon.com |

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

| I certify that (Name of Agent)_ also certify that I am an officer of the reporting carrier; i agent; and, to the best of my knowledge, the reports an | is authorized to submit the information reported on behalf of the reporting carri- sponsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorize provided to the authorized agent is accurate. |
|---|---|
| Name of Authorized Agent: | |
| Name of Reporting Carrier: | |
| Signature of Authorized Officer: | Date: |
| Printed name of Authorized Officer: | |
| Title or position of Authorized Officer: | |
| Telephone number of Authorized Officer: | |
| Study Area Code of Reporting Carrier: | Filing Due Date for this form: |

TO BE COMPLETED BY THE AUTHORIZED AGENT:

| Certification of Agent A | Authorized to File Annual Reports for CAF or LI Recipie | ents on Behalf of Reporting Carrier |
|--|--|-------------------------------------|
| | orized to submit the annual reports for universal service support eporting carrier; and, to the best of my knowledge, the informations of the control of the | |
| Name of Reporting Carrier: | | |
| Name of Authorized Agent or Employee of Agent: | | |
| Signature of Authorized Agent or Employee of Agent: | | Date: |
| Printed name of Authorized Agent or Employee of Agent: | | |
| Title or position of Authorized Agent or Employee of Agent | | |
| Telephone number of Authorized Agent or Employee of Age | ent: | |
| Study Area Code of Reporting Carrier: | Filing Due Date for this form: | |

Attachments

| | ce Offerings Including Voice Rate Data ection Form | | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 |
|-------|---|---------------------------|--|
| <010> | Study Area Code | 170201 | |
| <015> | Study Area Name | VERIZON N-PA(QUAKER) | |
| <020> | Program Year | 2015 | |
| <030> | Contact Name - Person USAC should contact regarding this data | Alan J. Buzacott | |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2025152595 ext. | |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | alan.buzacott@verizon.com | |
| <701> | Residential Local Service Charge Effective Date 1/1/2014 | | |

<703>

<702> Single State-wide Residential Local Service Charge

| <a1></a1> | <a2> Exchange (ILEC)</a2> | sac (CETC) | kb1> Rate Type | Residential Local Service Rate | State Subscriber Line Charge | State Universal Service Fee | Mandatory Extended Area Service Charge | Total per line Rates and Fee |
|-----------|---------------------------|------------|-----------------------|--------------------------------|----------------------------------|------------------------------|---|--|
| PA | CHAPMAN LK | SAC (CETC) | PR PR | Service Rate | State Subscriber Line Charge | State Offiversal Service ree | Service Charge | Total per line Rates and Tex |
| PA | KEMPTON | | FR | - | | | | |
| PA | NEWSMITHVL | | FR | | | | | |
| PA | NEWTRIPOLI | | FR | | | | | |
| PA | AUBURN | | FR | design | | | (Series) | |
| PA | BROOKSIDE | | FR | | | | | Quinter of the last of the las |
| PA | BUFFALO | | FR | | | | | |
| PA | FRIEDENSBG | | PR | | (| | | _ |
| PA | LOYALSOCK | | PR | | | | 9 | |
| PA | MATAMORAS | | FR | | | | | |
| PA | MILFORD | | FR | | | | | - |
| PA | TAYLORSTN | | FR | | | | | |
| PA | TROUT RUN | | FR | المنتق | | | | Course |
| PA | BEACH LAKE | | FR | | | | | - |
| PA | DINGMAFRRY | | FR | | | | | - |
| PA | GALILEE | | FR | | | | | |
| PA | PINE GROVE | | FR | | | | | Addition |
| PA | SHOHOLA | | FR | | | | | |
| | | | | | | | *** | |
| | | | | | | | | |

(710) Broadband Price Offerings Data Collection Form

FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

| <010> | Study Area Code | 170201 |
|-------|---|---------------------------|
| <015> | Study Area Name | VERIZON N-PA (QUAKER) |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | Alan J. Buzacott |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2025152595 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | alan.buzacott@verizon.com |

| | T | - <b1></b1> | | <c> <d1></d1></c> | | | | Usage Allowance |
|-------|--|----------------------|-----------------------------|-------------------|--------|--|-----------------|------------------------------------|
| | Exchange (ILEC) | Residential | Residential State Regulated | Total Rates Broad | | | Usage Allowance | |
| State | Rate Fees and Fees Download Speed Lini | -Upload Speed (Mbps) | (GB) | Action Taken | | | | |
| | | | | | (Mbps) | | | When Limit Reached (select) |
| PA | All | | | | | | | Other, No limit on usage allowance |
| PA | A11 | , | | - | | | | Other, No limit on usage allowance |
| PA | All | | | | | | | Other, No limit on usage allowance |
| PA | All | | | | | | | Other, No limit on usage allowand |
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| (800) Operating Companies | | | FCC Form 481 |
|---------------------------|--------------------|--|---|
| Data Collection Form | 文学文学的"是一个文学的主义文学"。 | Control of the second of the s | OMB Control No. 3060-0985/OMB Control No. 3060-0819 |
| | | | July 2013 |

| <010> | Study Area Code | 170201 |
|-------|---|---------------------------|
| <015> | Study Area Name | VERIZON N-PA (QUAKER) |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | Alan J. Buzacott |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2025152595 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | alan.buzacott@verizon.com |
| <810> | Reporting Carrier Verizon North LLC | |
| <811> | Holding Company | |
| <812> | Operating Company Verizon North LLC | |

| <813> <61> | <32> | city. |
|---|--------|--|
| Affiliates | SAC | Doing Business As Company or Brand Designation |
| Verizon New England Inc. | 115112 | Verizon |
| Verizon New England Inc. | 585114 | Verizon |
| Verizon New York Inc. | 155130 | Verizon |
| Verizon New Jersey Inc. | 165120 | Verizon |
| Verizon Pennsylvania LLC | 175000 | Verizon |
| Verizon North LLC | 170169 | Verizon |
| Verizon North LLC | 170170 | Verizon |
| Verizon North LLC | 170201 | Verizon |
| Verizon Maryland LLC | 185030 | Verizon |
| Verizon Virginia LLC | 195040 | Verizon |
| Verizon Florida LLC | 210328 | Verizon |
| Verizon Delaware LLC | 565010 | Verizon |
| Verizon Washington D.C. Inc. | 575020 | Verizon |
| Verizon California Inc. | 542319 | Verizon |
| Verizon California Inc. | 542302 | Verizon |
| GTE Southwest d/b/a Verizon Southwest | 442080 | Verizon |
| GTE Southwest d/b/a Verizon Southwest | 442154 | Verizon |
| Verizon South Inc. | 190233 | Verizon |
| Verizon South Inc. | 190479 | Verizon |
| Verizon South Inc. | 230864 | Verizon |
| MCImetro Access Transmission Services LLC | 449007 | Verizon |
| RSA 7 Limited Partnership | 359070 | Verizon |
| Iowa 8 Monona Limited Partnership | 359071 | Verizon |
| | | |

| (800) Operating Companies | FCC Form 481 |
|---------------------------|---|
| Data Collection Form | OMB Control No. 3060-0986/OM8 Control No. 3060-0819 |
| | July 2013 |

| <010> | Study Area Code | 170201 |
|-------|---|---------------------------|
| <015> | Study Area Name | VERIZON N-PA (QUAKER) |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | Alan J. Buzacott |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2025152595 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | alan.buzacott@verizon.com |
| <810> | Reporting Carrier Verizon North LLC | * * |
| <811> | Holding Company | |
| <812> | Operating Company Verizon North LLC | |

| 13> | (a) | <a2></a2> | <a3></a3> |
|-----|--|-----------|--|
| | Affiliates | SAC | Doing Business As Company or Brand Designation |
| | North Central RSA 2 of North Dakota Limited Partnership | 389006 | Verizon |
| | Northwest Dakota Cellular of North Dakota Limited Partnershi | 389007 | Verizon |
| | North Dakota RSA No. 3 Limited Partnership | 389008 | Verizon |
| | Badlands Cellular of North Dakota Limited Partnershi | 389009 | Verizon |
| | North Dakota 5 Kidder Limited Partnership | 389010 | Verizon |
| · | St. Lawrence Seaway RSA Cellular Partnership | 159014 | Verizon |
| | New York RSA 2 Cellular Partnership | 159015 | Verizon |
| | Wisconsin RSA #1 Partnership | 339023 | Verizon |
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Verizon works to satisfy all service requests, but not every initiated order is ultimately fulfilled. There are occasions when broadband service cannot be installed at the requesting address location due to reasons such as distance, capacity, and equipment incompatibility. In those cases, Verizon will review whether it can provide broadband service from other access points or utilize available equipment. If Verizon's review is unsuccessful, then the order is cancelled and the customer is notified.

Name of companies covered by this Certification: Quaker State

I, Timothy Smith, certify that I am an officer of each of the Verizon entities listed above and, acting as an agent of these companies. Verizon has established operating procedures designed to comply with applicable consumer protection rules. Verizon is subject to service quality requirements in many states and complies with their related duties, which, depending on the state, may include periodic performance reporting, the implementation of improvement plans and monetary payments if the reported performance does not meet applicable standards.

Name of signatory: Timothy Smith

Name of companies covered by this Certification: Quaker State

I, Timothy Smith, certify that I am an officer of the reporting carrier and that my responsibilities include ensuring compliance with the requirements of 47 CFR 54.202(a)(2) that the carrier be able to function in emergency situations. Specifically, the reporting carrier has a reasonable amount of back-up power to ensure functionality without an external power source, is generally able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations. I certify that the carrier is able to function in emergency situations as set forth in section 54.202(a)(2).

Name of signatory: Timothy Smith

Name of companies covered by this Certification: Quaker State

I, Timothy Smith, an officer of the reporting carrier, certify that the voice service rates for the Verizon entity listed above is less than two standard deviations above the applicable national average urban rate for voice service, as required in 47 C.F.R. § 54.313(a)(10).

Name of signatory: Timothy Smith

| FCC For | rm 481 - Carrier Annual Reporting Data Collection Form | | | PCC Form 481 OMB Control No. 306 July 2013 | 0-0986/OMB Control No. 3060-0219 |
|------------------|---|-------------------|-------------------------------|--|--|
| <010> | Study Area Code | 175000 | | | |
| <015> | Study Area Name | VERIZON PENNSYLV | ANIA | | |
| <020> | Program Year | 2015 | | | |
| <030> | Contact Name: Person USAC should contact with questions about this data | Alan J. Buzacott | N. | | |
| <035> | Contact Telephone Number: Number of the person identified in data line <030> | 2025152595 ext. | | | |
| <039> | Contact Email Address: Email of the person identified in data line <030> | alan.buzacott@ve | erizon.com | | |
| ANNUA | AL REPORTING FOR ALL CARRIERS | | | | 54.313 54.422 Completion Required Required |
| <100> | Service Quality Improvement Reporting | | (complete attached w | orksheet) | (check box when complete) |
| <200> | Outage Reporting (voice) | | (complete attached w | orksheet) | 1 |
| <210> | <- check box if no | outages to report | | | V 11111111 |
| <300> | Unfulfilled Service Requests (voice) 0 | | | _ | |
| <310> | Detail on Attempts (voice) | | | | |
| | | | | (attach descriptive | document) |
| <320> | Unfulfilled Service Requests (broadband) | 0 | | | MILL |
| <330> | Detail on Attempts (broadband) | | | (attach descriptive | document) |
| | | | | | |
| <400> | | | | | |
| <410> <420> | Fixed Mobile | | | | |
| <430> | | band) | | | / / |
| <440> | Fixed | | | | THE PARTY OF THE P |
| <450> <500> | Mobile Service Quality Standards & Consumer Protection R 175000pa510.pdf | ules Compliance | (check to indicate cer | rtification) | |
| <510> | | | (attoched descript | ive document) | / |
| <600> | Functionality in Emergency Situations 175000pa610.pdf | | (check to indicate ce | rtification) | 7 |
| <610> | | | (attached descriptive | document) | 1 |
| | Samuel Price Offician (miles) | | | | |
| <700> <710> | | | (complete attached v | | |
| <800> | | | (complete attached v | 1245 - 22 | 1 1 |
| | Tribal Land Offerings (Y/N)? | | (if yes, complete attached v | | |
| <1000> | Voice Services Rate Comparability 175000pa1010.pdf | | (check to indicate ce | rtification) | |
| <1010 | > | | (attach descriptive a | focument) | |
| <1100 | > Terrestrial Backhaul (Y/N)? O | | (if not, check to indicate co | ertification) | |
| <1110 | Terms and Condition for Lifeline Customers | | (complete attached a | | |
| | Price Cap Carriers, Proceed to Price Cap Additional | Documentation W | | | |
| <2000> <2005> | Including Rate-of-Return Carriers affiliated with Pi | | | | |
| 207554 | Rate of Return Carriers, Proceed to ROR Additional | Documentation W | orksheet | | |
| <3000> <3005> | | | (check to indicate cer | C. Commercial Commerci | |
| <3003> | | D FOR PUR | (complete attached w | | V 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |

| | ervice Quality Improvement Reporting ellection Form | | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 |
|--------|---|---------------------------|--|
| <010> | Study Area Code | 175000 | |
| <015> | Study Area Name | VERIZON PENNSYLVANIA | |
| <020> | Program Year | 2015 | |
| <030> | Contact Name - Person USAC should contact regarding this data | Alan J. Buzacott | |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2025152595 ext. | |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | alan.buzacott@verizon.com | |
| <110> | Has your company received its ETC certification from the FCC? | (yes / no) O | |
| <111> | If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC? | (yes / no) O O | |
| <1112> | If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service. Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your of CETC which only receives frozen support, your progress report is only required to address voice telephony service. | ompany is a | |
| | Please check these boxes below to confirm that the attached documents(s), on life 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate. | ne | Name of Attached Document |
| <113> | Maps detailing progress towards meeting plan targets | | |
| <114> | Report how much universal service (USF) support was received | | |
| <115> | How (USF) was used to improve service quality | | |
| <116> | How (USF)was used to improve service coverage | | |
| <117> | How (USF) was used to improve service capacity | | |
| <118> | Provide an explanation of network improvement targets not met in the prior calendar year. | | |